



Hamilton County Emergency Management

18100 Cumberland Road
Noblesville, Indiana 46060

Phone (317) 770-3381 Fax (317) 770-3384

VOLUNTEER ACKNOWLEDGEMENT FORM

- 1) I understand that my service as an emergency management volunteer may involve situations that could potentially expose me to personal injury. I release and hold harmless the Hamilton County Emergency Management Agency, Hamilton County and its employees, directors, officers and elected officials from all claims of liability, damages, causes of action or other relief not specifically contained herein for injuries I may sustain while acting within the scope or course of my duties on behalf of Hamilton County.
- 2) I understand that when I am deployed as an emergency management volunteer, I am to fully obey all traffic safety laws including speed limits and traffic control signs and devices.
- 3) I understand that I cannot trespass onto the real property of another without express permission of the land-owner.
- 4) I understand that I am required to maintain insurance on my personally owned vehicle as a prerequisite to participating in an Emergency Management activity or deployment. I also understand that I am required to present proof of insurance to Emergency management.
- 5) I understand that Hamilton County has elected to cover rostered volunteers with medical treatment provisions of the worker's compensation laws for injuries incurred while acting within the scope or course of the volunteer's duties on behalf of Hamilton County. However, this coverage does not include provisions for lost wages in any form.
- 6) I understand that Hamilton County's general liability insurance coverage applies to rostered volunteers authorized by the Hamilton County Emergency Management Agency but only while acting within the scope or the course of the volunteer's duties on behalf of Hamilton County. This coverage does not include provisions that insure, reimburse or compensate, in any way, damage to or destruction of the volunteer's personally owned vehicle.
- 7) I understand that all volunteers must consent to and pass a criminal history check before being authorized to participate in Hamilton County Emergency Management Agency activities or deployment.

Signature of Applicant

Date

Printed name of Applicant

Signature of EMA Deputy Director

Date

Signature of EMA RACES Officer

Date

Criminal History Check

A condition for volunteer service to the Hamilton County Emergency Management Agency requires that an applicant successfully pass a criminal history check.

National Incident Management System (NIMS) Compliance

On February 28, 2003, President Bush issued Homeland Security Presidential Directive-5. HSPD-5 directed the Secretary of Homeland Security to develop and administer a National Incident Management System (NIMS). NIMS provides a consistent nationwide template to enable all government, private-sector, and nongovernmental organizations to work together during domestic incidents.

A condition for volunteer service to the Hamilton County Emergency Management Agency requires that an applicant successfully pass the ICS 100 and IS-700 online courses. When you pass your tests you will receive an email from FEMA with a link to your training certificate. Please print out and attach *copies* of your FEMA certificates to your application and submit to the EMA office.

ICS 100, Introduction to the Incident Command System, introduces the Incident Command System (ICS) and provides the foundation for higher level ICS training. This course describes the history, features and principles, and organizational structure of the Incident Command System. It also explains the relationship between ICS and the National Incident Management System (NIMS).

<http://training.fema.gov/EMIWeb/IS/IS100b.asp>

IS-700, National Incident Management System (NIMS), An Introduction, introduces NIMS and takes approximately three hours to complete. It explains the purpose, principles, key components and benefits of NIMS. The course also contains "Planning Activity" screens giving you an opportunity to complete some planning tasks during this course. The planning activity screens are printable so that you can use them after you complete the course.

<http://training.fema.gov/emiweb/is/is700a.asp>

Hamilton County EMA Loyalty Oath & Conditions Of Appointment

I do solemnly swear (or affirm) that I will support the Constitution of the United States and the Constitution of the State of Indiana and I will faithfully discharge the duties of my appointment to the best of my ability.

I fully understand and acknowledge that there is a ONE YEAR probationary period starting from the date of the signature of the Hamilton County EMA Deputy Director on the front side of this application.

I fully understand and acknowledge that the identification card issued to me remains the property of the Hamilton County Emergency Management Agency.

I fully understand and acknowledge that identification card shall be revoked, and participation in the EMA volunteer program terminated for any improper use of the card or may be revoked for non-participation in the program at the discretion of the Hamilton County Emergency Management Agency Executive Director, Deputy Director, and the Hamilton County EMA RACES Board of Officers.

Upon termination from the program, the identification card and any issued equipment shall be returned to the Hamilton County Emergency Management Agency.

My signature on the front side of this form confirms that I have read and understand the conditions of the criminal history check, NIMS compliancy and the conditions of appointment set forth for participation in the Hamilton County Emergency Management Agency volunteer program.

Sign and mail (or drop off) Volunteer Program Application & Security Check Release Forms to the following address:

**Hamilton County EMA
Attn: Deputy Director Carl Erickson
18100 Cumberland Road
Noblesville, IN 46060**